



U.S. DEPARTMENT OF THE INTERIOR

U.S. FISH & WILDLIFE SERVICE, ALASKA REGION

SPECIAL USE PERMIT APPLICATION

OFFICE USE:
SUP # _____

NOTICE: In accordance with the Paperwork Reduction Act of 1995 (44 U.S.C. 3501, et seq.) and the Privacy Act of 1974 (5 U.S.C. 552a) please be advised that:

1. The permitting of compatible economic and public uses on lands of the National Wildlife Refuge System is authorized by: (a) the National Wildlife Refuge System Administration Act (16 U.S.C. 668dd-ee) as amended by the National Wildlife Refuge System Improvement Act of 1997 (Pub. L. 105-57); (b) the Refuge Recreation Act (16 U.S.C. 460k-n); (c) Bald Eagle Protection Act (16 U.S.C. 663a); (d) Endangered Species Act of 1973 (16 U.S.C. 1539); (e) Migratory Bird Treaty Act (16 U.S.C. 703-711); (f) Marine Mammal Protection Act of 1972 (16 U.S.C. 1371-1383); (g) Lacey Act (18 U.S.C. 42 and 44); and (h) Tariff Classification Act of 1962 (19 U.S.C. 1202).

2. Public and economic uses of national wildlife refuges may be authorized upon a determination that such uses are compatible with the purpose(s) for which the refuge was established and the mission of the National Wildlife Refuge System, and are not inconsistent with public safety. The action also must be in accordance with provisions of all laws applicable to the area, consistent with the principles of sound fish and wildlife management and otherwise in the public interest.

3. The application form will be used by U.S. Fish and Wildlife Service personnel to evaluate the qualifications and conclude the eligibility of the applicant. Consistent with 50 CFR 36.41(d)(2), applicants may present the application for noncompetitively issued permits verbally, if he/she is unable to prepare a written application. Applicants are required to provide their social security or taxpayer identification number for activities subject to collection of fees by the Service.

4. Routine use disclosures may also be made (1) to the U.S. Department of Justice when related to litigation or anticipated litigation; (2) of information indicating a violation or potential violation of a statute, regulation, rule, order or license to appropriate Federal, State, local or foreign agencies responsible for investigating or prosecuting the violation or for enforcing or implementing the statute, rule, regulation, order or license; (3) from the record of an individual in response to an inquiry from a Congressional office made at the request of that individual (42 FR 19083; April 11, 1977)

5. Information requested in this form is purely voluntary, but failure to answer questions may jeopardize eligibility to receive permits. Response is not required unless a currently valid Office of Management and Budget (OMB) control number is displayed.

6. The public reporting burden for this information collection varies based on the specific refuge use being requested. The relevant burden estimate ranges from 1.5 hours for each non-competitively bid permit, to 30 hours for each competitively awarded permit, to 40 hours for each 1307 permit being requested. This burden estimate includes time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of the form made be made to the Service Information Collection Clearance Officer, Fish and Wildlife Service, Mail Stop 222, Arlington Square, U.S. Department of the Interior, 1849 C Street, N.W., Washington, D.C. 20240, and to the Office of Information and Regulatory Affairs, OME, Attention: Desk Officer for the Interior Department (1018-0014), Washington, D.C. 20503.

FOR OFFICE USE ONLY:
SUP # _____

1) Please type or print legibly in ink. Answer all questions completely or mark "N/A" if not applicable.

APPLICANT NAME: _____

BUSINESS NAME: _____

**TAXPAYER IDENTIFICATION NUMBER, or
SOCIAL SECURITY NUMBER:** _____

PRIMARY ADDRESS:
(Business Address)

ALTERNATE ADDRESS:

PRIMARY PHONE NUMBER: _____

ALTERNATE PHONE NUMBER: _____

DATES VALID: _____

FAX NUMBER: _____

E - MAIL ADDRESS: _____

AS AN APPLICANT, ARE YOU: (Mark one box with "X")

☐ INDIVIDUAL

☐ CORPORATION

☐ PARTNERSHIP/ASSOCIATION

☐ GOVERNMENT/STATE AGENCY

☐ OTHER _____

If you are an INDIVIDUAL or PARTNERSHIP, are you also a citizen(s) of the United States?

YES _____ NO _____

2) **NATIONAL WILDLIFE REFUGE**

On the list of Alaska National Wildlife Refuges below, mark with an X the refuge you are submitting this application for.

<input type="checkbox"/> Alaska Maritime NWR	<input type="checkbox"/> Kodiak NWR
<input type="checkbox"/> Alaska Peninsula/Becharof NWR	<input type="checkbox"/> Koyukuk/Nowitna NWR
<input type="checkbox"/> Arctic NWR	<input type="checkbox"/> Selawik NWR
<input type="checkbox"/> Innoko NWR	<input type="checkbox"/> Tetlin NWR
<input type="checkbox"/> Izembek NWR	<input type="checkbox"/> Togiak NWR
<input type="checkbox"/> Kanuti NWR	<input type="checkbox"/> Yukon Delta NWR
<input type="checkbox"/> Kenai NWR	<input type="checkbox"/> Yukon Flats NWR

3) **SPECIAL USE PERMIT ACTIVITIES**

Type and description of proposed activity:

Area(s) of use (delineate on USGS topographic maps if applicable):

Estimated starting and ending dates of proposed activity:

Maximum number of clients per day: _____ Per season: _____

4) Will your business be operating aircraft (not hiring air taxis) within the Refuge?

YES _____ NO _____ If so, will your business be operating aircraft under:
(check one) _____ FAA Regulations Part 91 (Incidental Air) _____ FAA Regulations Part 135 (Air Taxi)

(PLEASE PROVIDE A COPY OF YOUR FAA CERTIFICATION.)

Name of Air Taxi(s) you plan to use: (Please note that air taxis you use for activities on Refuge lands/waters must be permitted to operate on the Refuge.)

List the MAKE, MODEL, WHEEL/FLOAT/SKI, COLOR and TAIL NUMBER of all aircraft you own/lease/operate that you will use in your proposed activity:

MAKE	MODEL	WHEEL (✓)	SKI (✓)	FLOAT (✓)	COLOR	TAIL NUMBER

5) Will your business be operating other modes of transportation within the Refuge?

YES _____ NO _____ If so, list the type of vessel(s) or vehicle(s) and the maximum passenger capacity of the vehicles and/or vessels (not aircraft) you plan to use within refuge boundaries.

TYPE VESSEL/VEHICLE	MAXIMUM CAPACITY	REGISTRATION NUMBER

6) We require you to carry liability insurance to provide protection for visitors you serve on refuges. Applicants must obtain liability coverage BEFORE we can issue a Special Use Permit for commercial visitor service activities. Refer to the enclosed Insurance Information Sheet for minimum coverage requirements. You must name the U.S. Government as an additional insured. Do you have current liability insurance? YES _____ NO _____ (Attach a copy of the insurance certificate.)

7) Within the past 5 years, have the company (entity) or any of the owners of the business been convicted, pled nolo contendere, or forfeited collateral for any violations of State, Federal, or local law or regulations related to fish and wildlife or permit activities? YES _____ NO _____

8) Are the company (entity) or any of the owners of the business now under charges for any violation of State, Federal, or local law or regulations related to fish and wildlife or permit activities? YES _____ NO _____

9) Within the past 5 years, have any of your current or proposed employees been convicted, pled nolo contendere, or forfeited collateral for any State, Federal or local law or regulations related to fish and wildlife or permit activities: OR are they now under charges for any violation of state, federal or local law or regulations related to fish and wildlife or permit activities? YES _____ NO _____

10) IF YOU ANSWERED "YES" TO QUESTIONS #7, 8 OR 9, PLEASE GIVE DETAILS IN THE SPACE BELOW. For each violation, provide the: 1) Individual's Name, 2) Date, 3) Charge, 4) Place, 5) Court, and 6) Action Taken.

INDIVIDUAL'S NAME	DATE	CHARGE	PLACE	COURT	ACTION

11) If this application is in response to a prospectus for a competitively awarded permit, please provide a detailed response which addresses, at a minimum, the following factors: proposed operations plan; complete above history of violation related questions 7, 8, and 9 for the past 10 years; safety record, training and proposed safety plan; documentation of experience and knowledge applicable to both the proposed activity and delineated use area or general geographical area; complete list and description of property, equipment and accessories; and complete list of clients for same or similar activities during the past three years. (Use separate sheets to complete this question.)

12) Provide a complete list of names, addresses and phone numbers of employees who will be assisting with permit activities on the refuge. Also indicate in what capacity they will be operating (e.g., guide, pilot, camp cook, etc.) Any employee, including the applicant, who will be operating a vehicle, aircraft, or vessel while carrying clients must provide their State drivers license number, pilot certificate number, or applicable vessel operating license number and indicate whether they have had any such licenses suspended or revoked, or have been convicted for driving while under the influence of alcohol or drugs during the past five years. Please use separate sheet to provide this information.

13) False, fictitious or fraudulent statements or representations made in this application may be grounds for revocation of the Special Use Permit and may be punishable by fine or imprisonment (18 U.S.C. 1001). We will consider all information you provide in reviewing this application.

14) Please attach a copy of your State business license and any applicable State or Federal licenses, certifications, and registrations required for the activity you propose to conduct on the Refuge (e.g., State Big Game Guiding License, State Transporter License, FAA Air Taxi Certificate, U.S. Coast Guard License, sport fish guide registration, etc.)

SIGNATURE OF OWNER/AGENT
(Attach proof of Agent)

PRINTED NAME

DATE

FOR OFFICE USE ONLY				
Check #	Check Amount:	Overpayment:	Additional Amount Needed:	Fee Not enclosed
WERE THESE DOCUMENTS ENCLOSED WITH APPLICATION?				
AIRCRAFT INSURANCE: YES NO		GENERAL LIABILITY INSURANCE: YES NO		
STATE BUSINESS LICENSE: YES NO		OTHER LICENSES/CERTIFICATIONS: YES NO		
MISSING DOCUMENTATION _____				

FOR OFFICE USE ONLY:
SUP # _____

1) Please type or print legibly in ink. Answer all questions completely or mark "N/A" if not applicable.

APPLICANT NAME: John Kwietniak

BUSINESS NAME: Tesoro Alaska Company

TAXPAYER IDENTIFICATION NUMBER, or
SOCIAL SECURITY NUMBER: 321654

PRIMARY ADDRESS:
(Business Address) 54741 Tesoro Rd. Kenai, AK 99611

ALTERNATE ADDRESS: NA

PRIMARY PHONE NUMBER: (907) 776-3569

ALTERNATE PHONE NUMBER: (907) 776-8191

DATES VALID: 4/15/05- 9/1/05

FAX NUMBER: (907) 776-3812

E - MAIL ADDRESS: jkwietniak@tesoropetroleum.com

AS AN APPLICANT, ARE YOU: (Mark one box with "X")

{ } INDIVIDUAL

☒ CORPORATION

{ } PARTNERSHIP/ASSOCIATION

{ } GOVERNMENT/STATE AGENCY

{ } OTHER _____

If you are an INDIVIDUAL or PARTNERSHIP, are you also a citizen(s) of the United States?

YES ☐ NO ☐

2) **NATIONAL WILDLIFE REFUGE**

On the list of Alaska National Wildlife Refuges below, mark with an X the refuge you are submitting this application for.

<input checked="" type="checkbox"/> Alaska Maritime NWR	<input type="checkbox"/> Kodiak NWR
<input type="checkbox"/> Alaska Peninsula/Becharof NWR	<input type="checkbox"/> Koyukuk/Nowitna NWR
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<input type="checkbox"/> Innoko NWR	<input type="checkbox"/> Tetlin NWR
<input type="checkbox"/> Izembek NWR	<input type="checkbox"/> Togiak NWR
<input type="checkbox"/> Kanuti NWR	<input type="checkbox"/> Yukon Delta NWR
<input type="checkbox"/> Kenai NWR	<input type="checkbox"/> Yukon Flats NWR

3) **SPECIAL USE PERMIT ACTIVITIES**

Type and description of proposed activity:

Oil recovery on water and shore

Area(s) of use (delineate on USGS topographic maps if applicable):

lat: 59 06'N lon: 151 41'W
Perl Rock, Kennedy Entrance, Cook Inlet

Estimated starting and ending dates of proposed activity:

4/15/05- 9/1/05

Maximum number of clients per day: 50

Per season: 50

4) Will your business be operating aircraft (not hiring air taxis) within the Refuge?

YES ☒

NO ☐

If so, will your business be operating aircraft under:

(check one) ☒ FAA Regulations Part 91 (Incidental Air)

☐ FAA Regulations Part 135 (Air Taxi)

(PLEASE PROVIDE A COPY OF YOUR FAA CERTIFICATION.)

Name of Air Taxi(s) you plan to use: (Please note that air taxis you use for activities on Refuge lands/waters must be permitted to operate on the Refuge.)

CargoCharter, Inc.

List the MAKE, MODEL, WHEEL/FLOAT/SKI, COLOR and TAIL NUMBER of all aircraft you own/lease/operate that you will use in your proposed activity:

MAKE	MODEL	WHEEL (✓)	SKI (✓)	FLOAT (✓)	COLOR	TAIL NUMBER
De Havilland	DHC-6-300 Twin Otter			X	red	N228CS
Cessna	414			X	white	N443R

5) Will your business be operating other modes of transportation within the Refuge?

YES ☒ NO ☐ If so, list the type of vessel(s) or vehicle(s) and the maximum passenger capacity of the vehicles and/or vessels (not aircraft) you plan to use within refuge boundaries.

TYPE VESSEL/VEHICLE	MAXIMUM CAPACITY	REGISTRATION NUMBER
3 ATVs	2 each, plus cargo	CNFG34, 45TY78, CQ2134

6) We require you to carry liability insurance to provide protection for visitors you serve on refuges. Applicants must obtain liability coverage BEFORE we can issue a Special Use Permit for commercial visitor service activities. Refer to the enclosed Insurance Information Sheet for minimum coverage requirements. You must name the U.S. Government as an additional insured. Do you have current liability insurance? YES ☒ NO ☐ (Attach a copy of the insurance certificate.)

7) Within the past 5 years, have the company (entity) or any of the owners of the business been convicted, pled nolo contendere, or forfeited collateral for any violations of State, Federal, or local law or regulations related to fish and wildlife or permit activities? YES ☐ NO ☒

8) Are the company (entity) or any of the owners of the business now under charges for any violation of State, Federal, or local law or regulations related to fish and wildlife or permit activities? YES ☐ NO ☒

9) Within the past 5 years, have any of your current or proposed employees been convicted, pled nolo contendere, or forfeited collateral for any State, Federal or local law or regulations related to fish and wildlife or permit activities: OR are they now under charges for any violation of state, federal or local law or regulations related to fish and wildlife or permit activities? YES ☐ NO ☒

10) IF YOU ANSWERED "YES" TO QUESTIONS #7, 8 OR 9, PLEASE GIVE DETAILS IN THE SPACE BELOW. For each violation, provide the: 1) Individual's Name, 2) Date, 3) Charge, 4) Place, 5) Court, and 6) Action Taken.

INDIVIDUAL'S NAME	DATE	CHARGE	PLACE	COURT	ACTION

More Information on this Form

When do you need this form?

When any oil spill recovery activities take place within a Nation Wildlife Refuge.

Who fills out this form?

The appropriate permitter with the responsible party.

Who signs this form?

The Incident Commander.

Where does this form get delivered?

Contact Catherine Berg for delivery information:
605 W 4th Ave Ste. G-61 Anchorage, AK 99501.
phone: (907) 271-1630